

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>PL</i>	<i>62114</i>	<i>9/30/02</i>
O.I.P.E. CLASSIFIER	<i>PL</i>	<i>62114</i>	<i>10/24</i>
FORMALITY REVIEW	<i>TE</i>	<i>652</i>	<i>10/26/02</i>
RESPONSE FORMALITY REVIEW	<i>SA</i>	<i>1039</i>	<i>12/12/02</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
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BEST AVAILABLE COPY

*TE #876*  
*12/12/02*

If more than 150 claims or 10 actions  
staple additional sheet here

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